

## BEST AVAILABLE COPY

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
<b>CLAIMS</b>									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1						51			
2						52			
3						53			
4						54			
5						55			
6						56			
7						57			
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39						89			
40						90			
41						91			
42						92			
43						93			
44						94			
45						95			
46						96			
47						97			
48						98			
49						99			
50						100			
TOTAL IND.	5					TOTAL IND.			
TOTAL DEP.	24	↔	↔	↔	↔	TOTAL DEP.	↔	↔	
TOTAL CLAIMS	29					TOTAL CLAIMS			

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS